

POSITION	INITIALS	ID NO.	DATE
	<i>[Signature]</i>		07/29/00
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		21	722100
FORMALITY REVIEW	<i>[Signature]</i>	60345	10-17-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	8/18/03
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
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If more than 150 claims or 10 actions
staple additional sheet here

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Best Available Copy